

County: Adams  
 ADAMS COUNTY MEMORIAL - NURSING ADDITION  
 P. O. BOX 40, 402 WEST LAKE  
 FRIENDSHIP 53934 Phone: (608) 339-3331  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? Yes  
 Number of Beds Set Up and Staffed (12/31/01): 18  
 Total Licensed Bed Capacity (12/31/01): 18  
 Number of Residents on 12/31/01: 18

Facility ID: 1010

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Ownership: Non-Profit Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? No  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 18

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	27.8		
Home Health Care	No					1 - 4 Years	44.4		
Supp. Home Care-Personal Care	No	Developmental Disabilities	5.6	Under 65	5.6	More Than 4 Years	27.8		
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	5.6	65 - 74	16.7				
Day Services	No	Mental Illness (Other)	0.0	75 - 84	22.2				100.0
Respite Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.0	*****			
Adult Day Care	Yes	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.6	Full-Time Equivalent			
Adult Day Health Care	No	Cancer	11.1			Nursing Staff per 100 Residents			
Congregate Meals	No	Fractures	5.6		100.0	(12/31/01)			
Home Delivered Meals	No	Cardiovascular	5.6	65 & Over	94.4				
Other Meals	No	Cerebrovascular	50.0			RNs	12.5		
Transportation	No	Diabetes	5.6	Sex	%	LPNs	11.4		
Referral Service	No	Respiratory	5.6			Nursing Assistants,			
Other Services	No	Other Medical Conditions	5.6	Male	22.2	Aides, & Orderlies			
Provide Day Programming for Mentally Ill	No		100.0	Female	77.8				36.8
Provide Day Programming for Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay		Family Care		Managed Care					
		No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	0	13	92.9	112	0	0.0	0	4	100.0	125	0	0.0	0	0	17	94.4
Intermediate	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Limited Care	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Personal Care	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Residential Care	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Dev. Disabled	---	---	---	---	1	7.1	173	0	0.0	0	0	0.0	0	0	0.0	0	1	5.6	
Traumatic Brain Inj	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Total	0	0.0			14	100.0		0	0.0		4	100.0		0	0.0		18	100.0	

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	11.1	38.9	50.0	18
Other Nursing Homes	0.0	Dressing	5.6	38.9	55.6	18
Acute Care Hospitals	100	Transferring	22.2	33.3	44.4	18
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	22.2	22.2	55.6	18
Rehabilitation Hospitals	0.0	Eating	33.3	50.0	16.7	18
Other Locations	0.0	*****				
Total Number of Admissions	6	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	16.7	Receiving Respiratory Care		5.6
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	66.7	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	20.0	Occ/Freq. Incontinent of Bowel	66.7	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		0.0
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		5.6
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		33.3
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	80.0	With Pressure Sores	16.7	Have Advance Directives		66.7
Total Number of Discharges (Including Deaths)	5	With Rashes	0.0	Medications		
				Receiving Psychoactive Drugs		33.3

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Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

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	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	100.0	88.1	1.14	84.6	1.18
Current Residents from In-County	88.9	83.9	1.06	77.0	1.15
Admissions from In-County, Still Residing	83.3	14.8	5.63	20.8	4.00
Admissions/Average Daily Census	33.3	202.6	0.16	128.9	0.26
Discharges/Average Daily Census	27.8	203.2	0.14	130.0	0.21
Discharges To Private Residence/Average Daily Census	5.6	106.2	0.05	52.8	0.11
Residents Receiving Skilled Care	94.4	92.9	1.02	85.3	1.11
Residents Aged 65 and Older	94.4	91.2	1.04	87.5	1.08
Title 19 (Medicaid) Funded Residents	77.8	66.3	1.17	68.7	1.13
Private Pay Funded Residents	22.2	22.9	0.97	22.0	1.01
Developmentally Disabled Residents	5.6	1.6	3.55	7.6	0.73
Mentally Ill Residents	5.6	31.3	0.18	33.8	0.16
General Medical Service Residents	5.6	20.4	0.27	19.4	0.29
Impaired ADL (Mean)*	64.4	49.9	1.29	49.3	1.31
Psychological Problems	33.3	53.6	0.62	51.9	0.64
Nursing Care Required (Mean)*	7.6	7.9	0.96	7.3	1.04